FORM-D-RECEIVED MAR 2 8 2007

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# **FORM D**

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
ORM LIMITED OFFERING EXEMPT

1395374

OMB	APPROVAL	
OMB Num	ber: 3235-0076	
Expires:	April 30,2008	
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UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Private Placement  Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506 ☐ Section 4(6)  Type of Filing: ☑ New Filing ☐ Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (  check if this is an amendment and name has changed, and indicate change.)	
Young Players Association, Inc.	·
Address of Executive Offices (Number and Street, City, State, Zip Code) 510 3rd Street, Suite 200, Oakland, CA 94607	Telephone Number (Including Area Code) (510) 285-7019
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	PROCESSED
Media Services	
Type of Business Organization	APR 0 6 2007
corporation   limited partnership, already formed   other (p	olease specify):  HOMSON
Actual or Estimated Date of Incorporation or Organization: Month Year  Actual or Estimated Date of Incorporation or Organization: O Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	FINANCIAL  iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii
GENERAL INSTRUCTIONS .	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 6 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given b which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim fo accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales r the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal exappropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	

### A, DASIGIDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.

Check Box(es) that Apply: .	Promoter	Ø	Beneficial Owner		Executive Officer	V	Director		General and/or Managing Partner
Full Name (Last name first, : Smith, Courtney	if individual)			_	·····			•	
Business or Residence Addre 510 3rd Street, Suite 200	•			de)					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)						. <u>–</u> —.		
Business or Residence Addre	ess (Number and	Stree	t, City, State, Zip Co	de)					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								
Business or Residence Addre	ess (Number and	Stree	, I, City, State, Zip Co	de)				<del></del> -	· · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)		<del>.</del>						
Business or Residence Addre	ess (Number and	Stree	t, City, State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								<del></del> ·
Business or Residence Addre	ess (Number and	Stree	t, City, State, Zip Co	de)					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								
Business or Residence Addre	ess (Number and	Stree	t, City, State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner

					B. 17	NFORMAT	ION ABOU	T OFFERI	NG				7 75
1.	Has the	issuer solo	d, or does th			ll, to non-a Appendix				_	•••••	Yes []	No X
2.	What is	the minim	ium investn	nent that w	rill be acce	pted from a	ny individ	ual?				\$_1,0	00.00
3.			permit join									Yes	No
4.	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
	II Name (I ot Applica		first, if ind	ividual)									
			Address (N	lumber and	Street, C	ty. State, Z	(ip Code)	·					
NI-	<del>-</del> - <del>-</del>	and D	roker or De	-1						<del></del>			
iva	me of Ass	sociated Bi	roker or De	aler									
Sta			Listed Ha										
	(Check	"All State:	s" or check	individual	States)		***************************************	***************************************			***************************************	☐ Al	l States
	AL IL MT RI	IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Ful	II Name (	Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (	Number an	d Street, C	ity, State,	Zip Code)						
Na	me of Ass	sociated B	roker or De	aler				-					
Sta	ites in Wh	ich Persor	Listed Ha	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)						***************************************	☐ Al	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	II Name (	Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)				······································		
Na	me of Ass	sociated B	roker or De	aler					•				
Sta	ites in Wh	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers			<u>.</u>	· <del></del> ·		
	(Check	"All State:	s" or check	individual	States)	•			***************************************			☐ A!	I States
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	<b>;</b>	s
	Equity		s 12,000.00
	Common Preferred		
	Convertible Securities (including warrants)	;	s
	Partnership Interests		
	Other (Specify)		
	Total	12,000.00	s 12,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		<u> </u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		٠
		Number Investors	Aggregate Dollar Amount of Purchases \$ 12,000.00
	Accredited Investors		•
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$ <u> </u>
	Rule 504		\$
	Total	<u> </u>	\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		<b>\$</b>
	Printing and Engraving Costs		\$
	Legal Fees		, <b>\$</b>
	Accounting Fees		\$
	Engineering Fees	_	
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) State Filing Fee		s 300.00
	Total		\$ <u>300.00</u>

	(GOTTERINGERIGE NUMBE)	RONING STORS LEXIS SERVICE STORES ON R	ROGERDS	<u>`</u> `
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Qu proceeds to the issuer."	estion 4.a. This difference is the "adjusted gross		\$ \$
5.	Indicate below the amount of the adjusted gross procee each of the purposes shown. If the amount for any p check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C	surpose is not known, furnish an estimate and epayments listed must equal the adjusted gross		
			Payments to	
			Officers,	D
			Directors, & Affiliates	Payments to Others
	Salaries and fees	[		
	Purchase of real estate	[	¬ \$	\$
	Purchase, rental or leasing and installation of machin	nery	_	_
•	and equipment	[		\$
	Construction or leasing of plant buildings and facility	ies[		
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets	or securities of another		
	issuer pursuant to a merger)	•	<del></del>	' <del></del> '
	Repayment of indebtedness	-	<del></del>	_
	Working capital	[	s	<b> y</b> \$ 11,700.00
	Other (specify):	[	\$	\$
			¬\$	s
	Column Totals		\$ 0.00	\$_11,700.00
	Total Payments Listed (column totals added)		_	1,700.00
	<u> </u>	D. DEDERAL SIGNATURE	•	
sig	e issuer has duly caused this notice to be signed by the un nature constitutes an undertaking by the issuer to furnis information furnished by the issuer to any non-accred	h to the U.S. Securities and Exchange Commis	sion, upon writte	
Īss	uer (Print or Type)	jernature	Date	
Yo	ung Players Association, Inc.		March 13, 2007	
Na	ne of Signer (Print or Type) T	itle of Signer (Print or Type)		
Co		resident		
_		•		

# - ATTENTION -

			E: STATE SIGNATURE		
1.			2 presently subject to any of the disqualification	 Yes	No <b>X</b>
		•	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Young Players Association, Inc.		March 13, 2007
Name (Print or Type)	Title (Print or Type)	· · · · · · · · · · · · · · · · · · ·
Courtney Smith	President	

#### Instruction.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	APPENDIX										
1	Intend to non-a investor	I to sell ccredited s in State -Item I)	Type of security and aggregate offering price offered in state (Part C-Item 1)	4  Type of investor and amount purchased in State  (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL											
AK											
AZ											
AR											
CA		×	Common Stock	3	\$12,000.00	0	\$0.00		×		
СО		X									
СТ					_						
DE											
DC											
FL											
GA											
ні											
lD											
IL											
IN			·								
IA											
KS					-						
KY											
LA											
ME											
MD											
MA											
MI											
MŅ											
MS											

#### APPENDIX 2 3 4 5 1 Disqualification Type of security under State ULOE and aggregate (if yes, attach Intend to sell offering price Type of investor and explanation of to non-accredited investors in State offered in state amount purchased in State waiver granted) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited Yes No Investors Yes No State Investors Amount Amount MO MTNE NVX X NH NJ NM NY NC ND ОН OK OR PΑ RΙ SCSD TN TX UT VT VAWA WV WI

	· ,			APP	ENDIX		****	* * * * * * * * * * * * * * * * * * * *	i		
1		2 .	3		4				5 Disqualification		
	to non-a	d to sell accredited es in State 1-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				ate ULOE, attach ation of granted)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY											
PR											